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DATE April 7, 2003

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ATTENTION OF Examiner Jose G. Dees

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FROM John C. Serio

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C/M/A # 20520/1/2253

MESSAGE Attached please find a copy of the Amendment and Response under 37  
C.F.R. 1.111 for your review.

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## USPTO TRANSMITTAL

Any Initials: MSL/map

Docket No.: 20520/1 (S-8332-CIP)

The following has been received in the U.S. Patent and Trademark Office on the date stamped hereon. Kindly acknowledge receipt by date stamping and placing this card in the outgoing mail.

Inventor(s): McGhee et al.

Mailing Date: April 4, 2003

Appl No.: 09/772,801

Client: Sherwood Services AG

Filing Date: January 30, 2001

Parent No.

Issue Date:

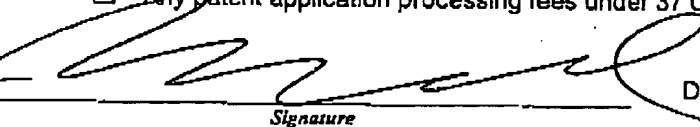
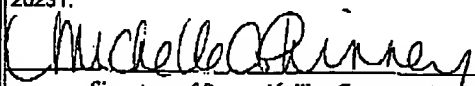
Title: HYDROGEL WOUND DRESSING AND THE METHOD OF MAKING  
AND USING THE SAME

Enclosed is:

Certificate of Mailing dated April 4, 2003 via First Class Mail

- PETITION FOR EXTENSION OF TIME (1 pg)
- AMENDMENT TRANSMITTAL LETTER (1 pg)
- AMENDMENT AND RESPONSE (11 pgs)
- CHARGE DEPOSIT ACCOUNT 50-0369



<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>				Docket No. 20520/1 (S-8332-CIP)	
Applicant(s): McGhee et al.					
Serial No. 09/772,801	Filing Date January 30, 2001	Examiner Williamson, M.		Group Art Unit 1616	
Invention: <b>HYDROGEL WOUND DRESSING AND THE METHOD OF MAKING AND USING THE SAME</b>					
<u>TO THE ASSISTANT COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	30 -	30 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	3 -	3 =	0 x	\$84.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. 50-0369 in the amount of _____ A duplicate copy of this sheet is enclosed. <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-0369 A duplicate copy of this sheet is enclosed. <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
 Signature			Dated: 4/4/2003		
Mark S. Leonardo, Esq. (Reg. No. 41,433) Brown Rudnick Berlack Israels LLP One Financial Center BOX 1P, 18th Floor Boston, MA 02111 Tel: 617-856-8145 Fax: 617-856-8201 Customer No. 21710					
<div style="border: 1px solid black; padding: 5px;">         I certify that this document and fee is being deposited on <u>April 4, 2003</u> with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.            Signature of Person Mailing Correspondence          Michelle A. Phinney          Typed or Printed Name of Person Mailing Correspondence       </div>					
cc:					